

**REGISTRATION FORM  
TRIAL ADVOCACY SCHOOL  
Stoney Creek Inn, Columbia, MO  
July 28-31, 2008**

**Name of Applicant:** \_\_\_\_\_

**County/Office:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**STATISTICS**

**Year admitted to the Bar:** \_\_\_\_\_

**Years in prosecution:** \_\_\_\_\_

**Number of felony jury trials:** \_\_\_\_\_

**Number of misdemeanor jury trials:** \_\_\_\_\_

**Number of non-jury trials (excluding traffic):** \_\_\_\_\_

**Return to:   Missouri Office of Prosecution Services  
                  Trial Advocacy School  
                  P. O. Box 899  
                  Jefferson City, MO 65102**

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